

**EXHIBIT A**

**CONTINUING CARE (MEMBERSHIP) AGREEMENT**

## I. INTRODUCTION

### A. GENERAL

This Continuing Care Agreement (“Membership Agreement” or “Agreement”) is made as of this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_ between \_\_\_\_\_ (whom we shall refer to as “you” or the “Member”), residing at \_\_\_\_\_ and Whitney Center, Inc., d/b/a Thrive at Home<sup>SM</sup> with Whitney Center (which we shall refer to as “we,” “us,” or “Thrive at Home”) located at 200 Leeder Hill Drive, Hamden Connecticut, 06517.

### B. ACCEPTANCE INTO THRIVE AT HOME

Thrive at Home is available to those who meet all eligibility requirements established by Thrive at Home. As a condition of membership in Thrive at Home, Member must continue to meet all eligibility requirements established by Thrive at Home, including but not limited to financial qualifications and assessment that Member’s health needs can be accommodated through Thrive at Home.

### C. TERMS AND CONDITIONS OF THIS AGREEMENT

#### 1. SERVICES

Thrive at Home will provide you the Services described in this Agreement, according to the terms and conditions herein, with the objective of enabling you to live in your Home for as long as is practicable.

#### 2. EFFECTIVE DATE OF MEMBERSHIP

The effective date of membership is the date this Agreement is executed by both parties (“Membership Date”). At that time, you will be partnered with your Personal Service Partner (or “PSP”), who will initiate a Health and Well-Being Assessment and work with you to develop your service plan. Services will be deemed to have commenced on the date the initial Health and Well-Being Assessment is completed. This Agreement will remain in effect until it is terminated in accordance with Section VII of this Agreement (the “Termination Date”).

#### 3. PLAN SELECTION AND FEES

Your options for Thrive at Home membership plans and associated fees are described in Exhibits D and E of the Disclosure Statement. The specifics of your selected plan and fee structure are detailed in Attachment I of this Agreement. By executing this Agreement, you agree to accept and pay for the Services, as set forth herein, according to the Membership Fee specified in Attachment I. You also agree to abide by the guidelines and policies of Thrive at Home at all times while receiving services under this Agreement.

## II. DEFINITIONS

All terms not defined herein shall have their meanings ascribed to them throughout the Agreement, or revert to their common meaning.

Personal Service Partner (PSP) refers to the person appointed by Thrive at Home as your partner in identifying your needs as determined by a Health and Well-Being Assessment, then designing and